THIRD PARTY ELEVATOR ANNUAL INSPECTION COMPLETION CERTIFICATION

Third Party Elevator Agency		Date
Elevator Inspector Supervisor		QEI#
Name of Inspector		QEI#
Unit #(s)		
DCRA Certificate #(s)		
Project Address		
Project name (Optional)		
Inspection Discipline:	Conveyance Equipment	
Inspection Type:	Periodic FES and Smoke test Heat devices Other	Category 1 Test/ InspectionCategory 5 Test/ InspectionEmergency Power
0 111 11		1
Certification		Scope of Certification
I,elevator inspector supervisor of the third party inspection activities performed by		All inspections of checked disciplines/ type above
at the address(es) and for the conveyance units specified above, hereby certify and attest		Disclaimer
under oath that the inspections and/or tests noted above have been performed in compliance with: ASME Q.E.I1 and the applicable conveyance code for the types of units listed above, and in compliance with the requirements contained in the District of Columbia Construction Codes with respect to the periodic inspections and testing requirements of the International Property Maintenance Code § 606, and the DCRA 3 rd party Inspection		The scope of this certification is restricted to the code and/or regulatory compliance inspection performed by the Inspection agency on behalf of DCRA and pursuant to provisions of the Homestart Regulatory Improvement Amendment Act of 2002, codified as DC Official Code, 2001 Ed DCMR §109.4, 6.1405.04(a).
Program manual.	o Dora to party mopeoution	The conveyance(s) and/or construction features were
All violations are abated and the conveyance(s) is/ are recommended to be APPROVED for the issuance of the DCRA certificate of Inspection.		inspected only for consistency with the approved plans and for compliance with the minimum requirements of the codes and regulations enforced by DCRA. This certification is not to be construed as certification of any portion of the design or construction of the project and
Signatureday	of, 20	does not relieve the registered designer(s) of record and other parties of their responsibilities for the design
Print Full Name and Title:		or construction of the project.
Professional Engineer/Architect or MCP Number:		Email: dcra-tpi-elevator@dc.gov
Agency Approval ID Number:		



